

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-375)**

ORIGINAL FEE

10/55322

FILING DATE

12 DEC 2006

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1		1	
2		1		1		1
3		2		1		1
4		0		1		1
5		0		1		1
6		0		1		1
7		0		1		1
8		0		1		1
9		0		1		1
10		0		1		1
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12		0		1		1
13		0		1		1
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TOTAL IND.	1		1		1	
TOTAL DEP.	19		18		18	
TOTAL CLAIMS	20		19		19	

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

BEST AVAILABLE COPY